FACILITY NAME:			DAT	E:		
NDEQ Facility ID#:	#: NOTE: YOU MUST ALSO FILL OUT SECTION 1.0 IN ITS ENTIRETY					
PART 3.1: NOTICE OF INTENT: Small Animal Incinerators						
IMPORTANT: PLEASE READ THE INSTRUCTIONS ACCOMPANYING THIS SECTION Please do NOT use pencil to fill out this application. Please type responses or use black ink.						
Boundaries and Location						
access so that the public of	fine your boundaries in order to cannot come in contact with air rmful to human health. For Stroundary is needed.	r	b) By applying to be covered by indicating that the source is (will and a minimum of five (5) miles and Weeping Water, NE. Is this	be) located (will) exist	in an attain between the	ment area
		001.05	YES	NO		001.06
NOTE: If you answered NC	to the questions on Boundaries a		you do not qualify for the Permit-by-F	Rule and you	must apply fo	
	Inc	inerator	Information			_
1) Incinerator Manufactur	rer:					
2) Mailing Address:		3)City:	4) State:	5) Zip Code:	
6) Phone:		7)Email:				
8) Model:) Model: 9) Design Burning Capacity (lbs/hr):					
Maximum Capacity (lbs):						
Incinerator Features						
		all Animal	Incinerator has the following f			
Dual Chambers:	☐ YES ☐ NO	012	Design Burning Capacity < 200 lbs/hr:	YES	∐ NO	012
Primary Charging Chamber:	☐ YES ☐ NO	012	Stack outlet ≥ 7 feet above the ground:	☐ YES	□ NO	012
Secondary Chamber (Afterburner):	☐ YES ☐ NO	012	Secondary Chamber (will be) ≥ 1400 degrees Fahrenheit during operation:	☐ YES	□ NO	012.05
Each Chamber has its own burner:	☐ YES ☐ NO	012	Secondary Chamber (will have) residence time ≥ 0.5 seconds:	☐ YES	□ NO	012.05
NOTE: If you answered NO to questions on the Incinerator Features, you do not qualify for the Permit-by-Rule and you must apply for a permit.						

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Operating Conditions and Limits				
Please confirm that your Small Animal Incinerator does (will) operate the following ways:				
The incineration rate (lb/hr) specified by the manufacturer will never be exceeded:	The incinerator will be properly operated at all times, in accordance with the manufacturer:			
YES NO 012.01	YES NO 012.08			
a) When the weight of the load is estimated, the incinerator will be operated as if the maximum rated amount of material was being incinerated:	b) When the weight of the load is known, the incinerator will be operated for a period of time equal to the weight of the load divided by the incineration rate (lb/hr) specified by the manufacturer:			
YES NO 012.01A	YES NO 012.01B			
NOTE: If you answered NO to questions on the Operating Conditions and Lin	nits, you do not qualify for the Permit-by-Rule and you must apply for a permit			
Incinera	tor Fuels			
Please confirm that your Small Anin	nal Incinerator will use the following:			
Only the following fuels will be used in the Incinerator:	If distillate fuel is used, the sulfur content will be < 0.05% by weight.			
Natural Gas OR Liquid Petroleum Gas OR Distillate Oil (Diesel #1 or #2)	YES NO 0012.02			
c) Total Rated Capacity of both Burners MMBtu/hr Total amount of fuel consumed by both Burners				
	do not qualify for the Permit-by-Rule and you must apply for a permit. Constraints			
Please confirm that your Small Animal Incinerator will incinerate the following: You agree to only incinerate the following material:				
Deceased Animals <u>OR</u> Deceased Animals and Medical/Infection in a single load)	ctious Waste (not to exceed 10% by weight of all waste incinerated			
YES				
NOTE: If you answered NO to question on the Material Constraints, yo	u do not qualify for the Permit-by-Rule and you must apply for a permit.			
Particulate Matter Control				
Please confirm that yo	u will do the following:			
Particulate matter shall not be allowed to become airborne in such quantities and concentrations that it remains visible in the air beyond your property line. Daily observations will occur in order to ensure compliance.	Determination whether particulate matter is becoming			
YES NO 012.07	If correction action is needed, it will be taken immediately. YES NO 012.07A			
NOTE: If you answered NO to questions on Particulate Matter Control, y	ou do not qualify for the Permit-by-Rule and you must apply for a permit.			

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	Keeping			
Please confirm that yo	ou will do the following:			
You will keep the appropriate records for a minimum of five years. YES NO 012.09	You will provide the Department personnel access to, or copies of, the required records.			
	YES NO 012.10 ep the following records.			
<u>=</u>	ll keep the following records:			
Records documenting the type of materials incinerated during each charge including YES	Records documenting the date and time daily particulate matter emission YES			
the weight of medical/infectious waste and total weight (estimated or actual) of NO each charge.	observations are conducted. A description of the observations made NO will be included in the documentation.			
Records documenting the operating cycle YES	Records documenting the types of fuel used YES			
of the main chamber (hours) and calculated incineration rate of each charge.	in the incinerator including sulfur content of distillate fuel, if used. NO			
Records documenting the date and time routine maintenance and preventative actions YES were performed. A description of the	Records documenting the date and time of equipment failures or malfunctions and the date and time remedial action was taken. A description of the failure malfunction or			
maintenance or action performed will NO be included in the documentation.	A description of the failure, malfunction, or remedial action will be included in the documentation.			
	I not check all of the boxes regarding the types of records you must keep, by-Rule and you must apply for a permit.			
A similar unit. You must submit air emissions testing for a similar unit that yields results that would be expensed. Has Air Emissions Testing been conducted on your in the similar unit.	Emissions Testing MUST be conducted on your unit on gresults for your unit or submit air emissions testing to be conducted from your unit. Small Animal Incinerator			
(the unit you (will) operate)?	☐ YES ☐ NO ☐ N/A			
Has Air Emissions Testing been conducted on a unit to the one proposed (same model or similar incinerary				
Has Air Emissions Testing been submitted to the De	epartment in the past?			
Date Submitted				
ND WOLG GO				

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If Testing has been Performed, please fill out the information below:

Tes	ting Compar	y Information			
10) Testing Company Name:	-				
11) Mailing Address:	12) City:		13) State:	14) Zip Code:	
15) Phone:	16) Email A	ddress or Website:			
I	Emissions Te	st Summary			
17) EPA Methods Used:		•			
18) Parameter/Calculation	Run 1	Run 2	Run 3	Average	
Percent Excess Oxygen in which Test was Conducted					
TOTAL PM (grains/dscf)					
TOTAL PM Corrected to 7% Oxygen (grains/dscf)				(This value must be below .1 grains/scf Title 129, Ch.22, Sec. 002)	
		lterable and condensable pa			
NOTE: The formula in 40 CFR, Part 60.5					
Please provide a copy of the <u>COMPLI</u> field data sheets, analytical data, and equipment test re	nt calibrations.				
	, y			012.12	
19) Does your Incinerator Emissions Test Resurvour incinerator has an opacity of visible emissions stack not ≥ 20% as evaluated by Method 9 in App CFR Part 60?	20) Does your Incinerator Emissions Test Results verify that the incinerator emits less than 0.60 pounds of particulate matter per million British Thermal unit (MMBtu)?				
YES NO		YES NO			
NOTE: If you answered NO to questions a	012.04 012.06 to questions above, you do not qualify for the Permit-by-Rule and you must apply for a permit.				
the Air Emissions Test Results submitt					
ne results accurately reflect what is expe			-		
		CODM AC NEEDED			

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If Testing has NOT been performed:			
Do you acknowledge that you must perform air emissions testing on your Small Animal Incinerator within 60 days after reaching maximum operating capacity but not later than 180 days after the start-up of operation?	☐ YES		NO N/A
Do you understand that these test results must prove that your Small Animal Incinerator has an opacity $\leq 20\%$, emits less particulate matter than 0.60 lbs/MMBtu per hour, and emits particulate matter less than 0.1 grains/dry standard cubic foot corrected to 7% oxygen?	☐ YES		NO N/A
Note: If you answered NO to the questions above, you do not qualify for the Permit-by-Rule	and must appl	y for a	permit.
PART 3.3: DIAGRAM: Small Animal Incinerators			
Please provide a diagram of the planned/existing incinerator in the space below or on a separate diagram must include all dimensions of the unit including length, width, height, stack heigh (are) used (e.g., engineering diagrams, surveyor's drawing, etc), it (they) should be clearly Part 3.3. Also clearly indicate that a separate, attached sheet(s) was submitted in the space	t, etc. If a se marked as be	parate	e, attached sheet(s) is

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